



CABINET FOR HEALTH SERVICES
COMMONWEALTH OF KENTUCKY
FRANKFORT, 40621-0001



DEPARTMENT FOR MEDICAID SERVICES

"An Equal Opportunity Employer M/F/D"

September 19, 2003

Nursing Facility Provider Letter #A-194

Dear Nursing Facility Provider:

When the Peer Review Organization (PRO) nurse enters your facility to complete continued stay reviews, she/he will request a census listing of all residents that you, the NF Provider, wish to have reviewed for Medicaid level of care requirements. It is the PRO nurse's responsibility to determine if each NF resident identified on your census listing meets the level of care requirements as outlined in 907 KAR 1:022E. It is your responsibility to provide the PRO nurse with a complete and accurate census listing to be reviewed.

When the PRO nurse completes the continued stay reviews from your census listing, you will receive a continued stay review form to validate each recipient's medical necessity and extension of his or her previous certification number. If you do not receive a continued stay review form for a resident on your listing at the conclusion of the PRO nurse's visit, this means the PRO nurse could not make a medical necessity determination and will now refer the case to a PRO Physician Advisor for further review.

At the end of the review visit, you may ask the PRO nurse to explain why you did not receive a continued stay review form for any resident on your census listing.

If you have any questions, contact Judy Montfort at 502-564-5707.

Sincerely,

Mike Robinson

Mike Robinson
Commissioner

MR/jdm

